Case 1:21 ev 00267 MSM-LDA Document 7 Filed 07/08/21 Page 1 of 2 PageID UNITED STATES DISTRICT COURT

for the

DISTRIC OF RHO	DE ISLAND 🔽
Carline Vilbon))
Plaintiff(s) V. 1. The Department of Children, Youth and Families	CA21 267 Civil Action No.
The Lifespan Facilities The Rumford House Group Home))
Defendant(s)	
SUMMONS IN A	CIVIL ACTION
To: (Defendant's name and address) 1. Kevin Aucoin, director of the 101Friendship Street, Provide	he Department of Children, Youth and Farhilies, ence, RI. 02903.
2. Timothy Babineau CEO of 02903	the Lifespan facilities, 593 Eddy Street, Providence, RI.
3. Arthur Mercurio, director o Farrell Place, Rumford, RI. 0	of residential services at the Rumford House group home. 2
A lawsuit has been filed against you.	
are the United States or a United States agency, or an officer P. 12 (a)(2) or (3) — you must serve on the plaintiff an answ the Federal Rules of Civil Procedure. The answer or motion whose name and address are: Carline Vilbon	ver to the attached complaint or a motion under Rule 12 of
74 Prince Street, Pawtucket,	RI. 02860
If you fail to respond, judgment by default will be ex You also must file your answer or motion with the court.	ntered against you for the relief demanded in the complaint.
	CLERK OF COURT
Date:06/10/2021	Signature of Clerk or Deputy Clerk
	Signature of Clerk of Deputy Glerk
Birde Elmesd 6/18/21	
LINDA ORMEROD Relosed	

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name of individual and title, if any) Kenin Aucouin, director of DCYF	
vas received by me on (date) LIVDA ORMEROD	
I personally served the summons on the individual at (place)	
on (date) 06/18/2021; or	
I left the summons at the individual's residence or usual place of abode with (name)	
ORMEROD , a person of suitable age and discretion who resides there,	
on (date) , and mailed a copy to the individual's last known address; or	
I served the summons on (name of individual) KEVIW AUCOUNDIRECTOR, who is	
I served the summons on (name of individual) KEVIW AUCOUN, DIRECTOR, who is designated by law to accept service of process on behalf of (name of organization) DEPARTMENT OF CHILD REPORTED.	=N
YOUTH AND FAMILIES on (date) 06/18/2021; or	
☐ I returned the summons unexecuted because ; or	
OF OWE OF HER COWORKERS, WHO TOLD HERTODONOT ACCEPT THE SUMMONS AND COMPLAINT.	: E
My fees are \$ for travel and \$ for services, for a total of \$	
I declare under penalty of perjury that this information is true.	
Date: 06/18/2021 Survey's signature SONT VILBON	
Printed name and title	
74 PRINCE ST, PAWTUCKET, RI 028	160

Additional information regarding attempted service, etc: